

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 303
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Political Action Committee of the American Association of Orthopaedic Surgeons--PAC of AAOS

Full Name (Last, First, Middle Initial)

A. Ravi Patel MD

Mailing Address 1810 Ladino Rd

City State Zip Code
 Sacramento CA 95864

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mercy Medical Group

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : 5801895

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Michael T Stowell MD

Mailing Address 1120A Professional Court

City State Zip Code
 Hagerstown MD 21740

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mid Atlantic Orthopaedic Specialists

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : 5801899

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Scott K McClelland MD

Mailing Address 135 East Shore Rd

City State Zip Code
 Monroe LA 71203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Orthopaedic Clinic

Occupation

Orthopaedic Surgeon

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : 5801901

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►